

PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

SERVE { ROBERT EVANCHICK, in his official capacity
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
1800 Elmerton Avenue Harrisburg, PA 17110-9758

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285 1
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	Number of parties to be served in this case 14
	Check for service on U.S.A. NOT US

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Fold

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ROBERT EVANCHICK IS, ACTING STATE POLICE COMMISSIONER.
THE ADDRESS IS PSP HEADQUARTERS.

Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY—DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. <i>(Sign only for USM 285 if more than one USM 285 is submitted)</i>	Total Process No. _____	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk	Date
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Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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REMARKS:

PRINT 5 COPIES:

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2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

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Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

SERVE AT **BRADLEY J. GETZ, in his official capacity**
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
8320 Schantz Road, Breinigsville, PA 18031

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285	1
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	Number of parties to be served in this case	14
	Check for service on U.S.A.	NOT US

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Fold

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PENNSYLVANIA STATE POLICE at Breinigsville, PA

Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

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PLAINTIFF	COURT CASE NUMBER
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DEFENDANT	TYPE OF PROCESS
ROBERT EVANCHICK et. al.	complaint

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Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF <i>Edward Thomas Kennedy</i>	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT	4152751244	APRIL 9, 2018

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PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

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Signature of U.S. Marshal or Deputy		

Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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REMARKS:

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <i>EXCELSIOR 770-773/20-8</i>	
SERVE { TYREE C. BLOCKER, in his official capacity	
AT { ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	
1800 Elmerton Avenue Harrisburg, PA 17110-9758	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285 1
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	Number of parties to be served in this case 14
	Check for service on U.S.A. NOT US

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Fold

ROBERT EVANCHICK IS, ACTING STATE POLICE COMMISSIONER.
THE ADDRESS IS PSP HEADQUARTERS.

Fold

Signature of Attorney other Originator requesting service on behalf of: <i>Z</i> Edward Thomas Kennedy	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9,2018
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. <i>(Sign only for USM 285 if more than one USM 285 is submitted)</i>	Total Process No. _____	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk	Date
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode	
Address (complete only different than shown above)	Date	Time <input type="checkbox"/> am <input type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy	

Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <i>EXCERPT FROM 5/13/2018</i>	
SERVE { TYREE C. BLOCKER, in his official capacity	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
AT	1800 Elmerton Avenue Harrisburg, PA 17110-9758
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	
Number of process to be served with this Form 285 1 Number of parties to be served in this case 14 Check for service on U.S.A. NOT US	

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Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9,2018
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Address (<i>complete only different than shown above</i>)	Date	Time <input type="checkbox"/> am <input type="checkbox"/> pm
Signature of U.S. Marshal or Deputy		

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U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	COURT CASE NUMBER
EDWARD THOMAS KENNEDY	NEW
DEFENDANT	TYPE OF PROCESS
ROBERT EVANCHICK et. al.	complaint

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
SERVE { TYREE C. BLOCKER, in his official capacity
AT { ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 1800 Elmerton Avenue Harrisburg, PA 17110-9758

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285	1
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	Number of parties to be served in this case	14
	Check for service on U.S.A.	NOT US

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THE ADDRESS IS PSP HEADQUARTERS.

Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
<i>Edward Thomas Kennedy</i>	<input type="checkbox"/> DEFENDANT	4152751244	APRIL 9, 2018

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Address (complete only different than shown above)	Date	Time
	<input type="checkbox"/> am	<input type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy	

Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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**U.S. Department of Justice
United States Marshals Service**

PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <i>EXCERPT 5/13/2018</i>	
SERVE { TYREE C. BLOCKER, in his official capacity	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
AT 1800 Elmerton Avenue Harrisburg, PA 17110-9758	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	
Number of process to be served with this Form 285 1 Number of parties to be served in this case 14 Check for service on U.S.A. NOT US	

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THE ADDRESS IS PSP HEADQUARTERS.

Signature of Attorney other Originator requesting service on behalf of: <i>Z</i> Edward Thomas Kennedy	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9,2018
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PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

SERVE { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
TYREE C. BLOCKER, in his official capacity
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 1800 Elmerton Avenue Harrisburg, PA 17110-9758

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EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	Number of parties to be served in this case 14
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Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

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AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
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EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	Number of parties to be served in this case 14
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Signature of Attorney other Originator requesting service on behalf of: Edward Thomas Kennedy	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9,2018
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DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

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Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
TYREE C. BLOCKER, in his individual capacity
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
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Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
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Fold

Fold

**ROBERT EVANCHICK IS, ACTING STATE POLICE COMMISSIONER.
 THE ADDRESS IS PSP HEADQUARTERS.**

Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (*See remarks below*)

Name and title of individual served (<i>if not shown above</i>)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode	
Address (<i>complete only different than shown above</i>)	Date	Time <input type="checkbox"/> am <input type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy	

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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REMARKS:

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5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF EDWARD THOMAS KENNEDY		COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.		TYPE OF PROCESS complaint
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN RICHARD H. D'AMBROSIA, in his official capacity	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 2930 Airport Road (PA-987) Bethlehem, PA 18107-2149	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		Number of process to be served with this Form 285 1
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031		Number of parties to be served in this case 14
		Check for service on U.S.A. NOT US

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

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RICHARD H. D'AMBROSIA, Captain
in his official and individual capacities,
PENNSYLVANIA STATE POLICE TROOP M

Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9,2018
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PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW	
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint	
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN		
SERVE	RICHARD H. D'AMBROSIA, in his official capacity	
AT	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 2930 Airport Road (PA-987) Bethlehem, PA 18107-2149	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		
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PENNSYLVANIA STATE POLICE TROOP M**

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DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

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PLAINTIFF	COURT CASE NUMBER
EDWARD THOMAS KENNEDY	NEW
DEFENDANT	TYPE OF PROCESS
ROBERT EVANCHICK et. al.	complaint

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ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
2930 Airport Road (PA-987) Bethlehem, PA 18107-2149

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PENNSYLVANIA STATE POLICE TROOP M

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		4152751244	APRIL 9, 2018

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DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

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DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint
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ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)		
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<input type="checkbox"/> EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031		Number of process to be served with this Form 285 1
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Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9,2018
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Name and title of individual served (<i>if not shown above</i>)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode	
Address (<i>complete only different than shown above</i>)	Date	Time <input type="checkbox"/> am <input type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy	

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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REMARKS:

PRINT 5 COPIES: 1. CLERK OF THE COURT

PRIOR EDITIONS MAY BE USED

2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
RICHARD H. D'AMBROSIA, in his individual capacity
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 2930 Airport Road (PA-987) Bethlehem, PA 18107-2149

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285	1
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	Number of parties to be served in this case	14
	Check for service on U.S.A.	NOT US

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Fold

RICHARD H. D'AMBROSIA, Captain
in his official and individual capacities,
PENNSYLVANIA STATE POLICE TROOP M

Fold

Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF Edward Thomas Kennedy	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT	4152751244	APRIL 9, 2018

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY– DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process No. _____	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk	Date
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Address (complete only different than shown above)	Date	Time <input type="checkbox"/> am <input type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy	

Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process" by U.S. Marshal"

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

SERVE { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
PENNSYLVANIA STATE POLICE
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
1800 Elmerton Avenue Harrisburg, PA 17110-9758

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285	1
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	Number of parties to be served in this case	14
	Check for service on U.S.A.	NOT US

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Fold

Fold

Office of Chief Counsel 1800 Elmerton Avenue Harrisburg, PA 17110
Joanna N. Reynolds Chief Counsel, <http://www.psp.pa.gov/contact/Pages/bureau-and-office-directory.aspx>.
Telephone: (717) 783-5568 Fax: (717) 772-2883 (Business Hours 7:00 am – 4:30 pm)

Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9,2018
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PLAINTIFF EDWARD THOMAS KENNEDY		COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.		TYPE OF PROCESS complaint
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN SERVE AT { PENNSYLVANIA STATE POLICE ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 1800 Elmerton Avenue Harrisburg, PA 17110-9758		
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<input type="checkbox"/> EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031		Number of parties to be served in this case 14
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PLAINTIFF EDWARD THOMAS KENNEDY		COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.		TYPE OF PROCESS complaint
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN SERVE AT PENNSYLVANIA STATE POLICE ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 1800 Elmerton Avenue Harrisburg, PA 17110-9758		
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<input type="checkbox"/> EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031		Number of parties to be served in this case 14
		Check for service on U.S.A. NOT US

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Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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PRIOR EDITIONS MAY BE USED

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN SERVE AT { PENNSYLVANIA STATE POLICE ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 1800 Elmerton Avenue Harrisburg, PA 17110-9758	
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Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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PRIOR EDITIONS MAY BE USED

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

SERVE { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
AT { PENNSYLVANIA STATE POLICE
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 1800 Elmerton Avenue Harrisburg, PA 17110-9758

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285	1
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	Number of parties to be served in this case	14
	Check for service on U.S.A.	NOT US

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 Joanna N. Reynolds Chief Counsel, <http://www.psp.pa.gov/contact/Pages/bureau-and-office-directory.aspx>.
 Telephone: (717) 783-5568 Fax: (717) 772-2883 (Business Hours 7:00 am – 4:30 pm)

Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF <i>Edward Thomas Kennedy</i> <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
		4152751244	APRIL 9, 2018

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PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
LESLIE S. RICHARDS, in her official capacities,
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 400 North Street, 8th Floor, Harrisburg, PA 17120

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285 1
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	Number of parties to be served in this case 14
	Check for service on U.S.A. NOT US

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

FoldFold

400 North is the Keystone Building Harrisburg, PA 17120 and 2 complaints, for BOTH her official and individual capacities each document.

Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9,2018
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PRIOR EDITIONS MAY BE USED

PLAINTIFF	COURT CASE NUMBER
EDWARD THOMAS KENNEDY	NEW
DEFENDANT	TYPE OF PROCESS
ROBERT EVANCHICK et. al.	complaint

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

SERVE { LESLIE S. RICHARDS, in her official capacities,
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
400 North Street, 8th Floor, Harrisburg, PA 17120

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PLAINTIFF	COURT CASE NUMBER
EDWARD THOMAS KENNEDY	NEW
DEFENDANT	TYPE OF PROCESS
ROBERT EVANCHICK et. al.	complaint

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AT { ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
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5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

PLAINTIFF	COURT CASE NUMBER
EDWARD THOMAS KENNEDY	NEW
DEFENDANT	TYPE OF PROCESS
ROBERT EVANCHICK et. al.	complaint

SERVE { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
AT LESLIE S. RICHARDS, in her official capacities,
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 400 North Street, 8th Floor, Harrisburg, PA 17120

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285	1
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	Number of parties to be served in this case	14
	Check for service on U.S.A.	NOT US

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Fold

Fold

400 North is the Keystone Building Harrisburg, PA 17120 and 2 complaints, for BOTH her official and individual capacities each document.

Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY—DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process No. _____	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk	Date
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date _____ Time _____ <input type="checkbox"/> am <input type="checkbox"/> pm Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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REMARKS:

PRINT 5 COPIES

1. CLERK OF THE COURT
2. USMS RECORD
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5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
LESLIE S. RICHARDS, in her official capacities,
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
400 North Street, 8th Floor, Harrisburg, PA 17120

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EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	Number of parties to be served in this case	14
	Check for service on U.S.A.	NOT US

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Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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Address (<i>complete only different than shown above</i>)	Date	Time <input type="checkbox"/> am <input type="checkbox"/> pm
Signature of U.S. Marshal or Deputy		

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PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW						
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint						
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN							
SERVE { LESLIE S. RICHARDS, in her individual capacities, AT { ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	400 North Street, 8th Floor, Harrisburg, PA 17120						
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW							
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031							
<table border="1"> <tr> <td>Number of process to be served with this Form 285</td> <td>1</td> </tr> <tr> <td>Number of parties to be served in this case</td> <td>14</td> </tr> <tr> <td>Check for service on U.S.A.</td> <td>NOT US</td> </tr> </table>		Number of process to be served with this Form 285	1	Number of parties to be served in this case	14	Check for service on U.S.A.	NOT US
Number of process to be served with this Form 285	1						
Number of parties to be served in this case	14						
Check for service on U.S.A.	NOT US						

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Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

SERVE { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
AT LESLIE S. RICHARDS, in her individual capacities,
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
400 North Street, 8th Floor, Harrisburg, PA 17120

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285	1
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	Number of parties to be served in this case	14
	Check for service on U.S.A.	NOT US

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Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9,2018
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PRIOR EDITIONS MAY BE USED

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

SERVE { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
AT **LESLIE S. RICHARDS, in her individual capacities,**
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
400 North Street, 8th Floor, Harrisburg, PA 17120

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Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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PRIOR EDITIONS MAY BE USED

PLAINTIFF	COURT CASE NUMBER
EDWARD THOMAS KENNEDY	NEW
DEFENDANT	TYPE OF PROCESS
ROBERT EVANCHICK et. al.	complaint

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

SERVE { LESLIE S. RICHARDS, in her individual capacities,
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
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Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
Edward Thomas Kennedy	<input type="checkbox"/> DEFENDANT	4152751244	APRIL 9, 2018

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PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

SERVE { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
AT LESLIE S. RICHARDS, in her individual capacities,
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
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<u>EDWARD THOMAS KENNEDY</u> <u>401 TILLAGE ROAD</u> <u>BREINIGSVILLE, PA 18031</u>	Number of parties to be served in this case	14
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Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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PRIOR EDITIONS MAY BE USED

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN	
SERVE AT { PENNSYLVANIA DEPARTMENT OF TRANSPORTATION ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 400 North Street, 8th Floor, Harrisburg, PA 17120	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285 1
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	Number of parties to be served in this case 14
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SERVICE OF PROCESS TO: Jason D. Sharp, Chief Counsel
400 North is the Keystone Building Harrisburg, PA 17120

Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN SERVE AT PENNSYLVANIA DEPARTMENT OF TRANSPORTATION ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 400 North Street, 8th Floor, Harrisburg, PA 17120	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	
<input type="checkbox"/> EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	
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SERVICE OF PROCESS TO: Jason D. Sharp, Chief Counsel
400 North is the Keystone Building Harrisburg, PA 17120

Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
PENNSYLVANIA DEPARTMENT OF TRANSPORTATION
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
400 North Street, 8th Floor, Harrisburg, PA 17120

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400 North is the Keystone Building Harrisburg, PA 17120

Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY– DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. <i>(Sign only for USM 285 if more than one USM 285 is submitted)</i>	Total Process _____ No. ____	District of Origin No. ____	District to Serve No. ____	Signature of Authorized USMS Deputy or Clerk	Date _____
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (*See remarks below*)

Name and title of individual served (<i>if not shown above</i>)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode	
Address (<i>complete only different than shown above</i>)	Date _____	Time _____
	<input type="checkbox"/> am <input type="checkbox"/> pm	
	Signature of U.S. Marshal or Deputy	

Service Fee	Total Mileage Charges including <i>endeavors</i>)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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REMARKS:

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

SERVE { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
PENNSYLVANIA DEPARTMENT OF TRANSPORTATION
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
400 North Street, 8th Floor, Harrisburg, PA 17120

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285	1
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	Number of parties to be served in this case	14
	Check for service on U.S.A.	NOT US

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Fold

Fold

SERVICE OF PROCESS TO: Jason D. Sharp, Chief Counsel
400 North is the Keystone Building Harrisburg, PA 17120

Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9,2018
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Address (<i>complete only different than shown above</i>)	Date	Time <input type="checkbox"/> am <input type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy	

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PRIOR EDITIONS MAY BE USED

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN SERVE AT <u>PENNSYLVANIA DEPARTMENT OF TRANSPORTATION</u> ADDRESS (<i>Street or RFD, Apartment No., City, State and ZIP Code</i>) 400 North Street, 8th Floor, Harrisburg, PA 17120	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285 1
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	Number of parties to be served in this case 14
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PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

SERVE { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
GREGORY D. JOHNSON, IN HIS OFFICIAL CAPACITY
 AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 1025 Peters Mountain Road Dauphin, PA 17018.

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285	1
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	Number of parties to be served in this case	14
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1025 Peters Mountain Road Dauphin, PA 17018. Phone: (717) 921-8007. Fax: (717) 921-3585.

Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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PRIOR EDITIONS MAY BE USED

PLAINTIFF EDWARD THOMAS KENNEDY		COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.		TYPE OF PROCESS complaint
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN SERVE AT GREGORY D. JOHNSON, IN HIS OFFICIAL CAPACITY ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 1025 Peters Mountain Road Dauphin, PA 17018.		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		Number of process to be served with this Form 285 1 Number of parties to be served in this case 14 Check for service on U.S.A. NOT US
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031		

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Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>		<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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PRIOR EDITIONS MAY BE USED

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

SERVE { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
GREGORY D. JOHNSON, IN HIS OFFICIAL CAPACITY
 AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 1025 Peters Mountain Road Dauphin, PA 17018.

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PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN	
SERVE { GREGORY D. JOHNSON, IN HIS OFFICIAL CAPACITY	
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	
1025 Peters Mountain Road Dauphin, PA 17018.	
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See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

SERVE { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
AT GREGORY D. JOHNSON, IN HIS OFFICIAL CAPACITY
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
1025 Peters Mountain Road Dauphin, PA 17018.

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PRIOR EDITIONS MAY BE USED

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN GREGORY D. JOHNSON, IN HIS individual CAPACITY ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 1025 Peters Mountain Road Dauphin, PA 17018.	
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PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

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GREGORY D. JOHNSON, IN HIS individual CAPACITY
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PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER NEW
DEFENDANT ROBERT EVANCHICK et. al.	TYPE OF PROCESS complaint

SERVE { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
GREGORY D. JOHNSON, IN HIS individual CAPACITY
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 1025 Peters Mountain Road Dauphin, PA 17018.

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285	1
EDWARD THOMAS KENNEDY 401 TILLAGE ROAD BREINIGSVILLE, PA 18031	Number of parties to be served in this case	14
	Check for service on U.S.A.	NOT US

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Fold

Fold

1025 Peters Mountain Road Dauphin, PA 17018. Phone: (717) 921-8007. Fax: (717) 921-3585.

Signature of Attorney other Originator requesting service on behalf of: <i>Edward Thomas Kennedy</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 4152751244	DATE APRIL 9, 2018
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. <i>(Sign only for USM 285 if more than one USM 285 is submitted)</i>	Total Process	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk	Date
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (<i>If not shown above</i>)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode	
Address (<i>complete only different than shown above</i>)	Date	Time <input type="checkbox"/> am <input type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy	

Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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REMARKS:

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

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		<input type="checkbox"/> DEFENDANT	4152751244	APRIL 9,2018

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